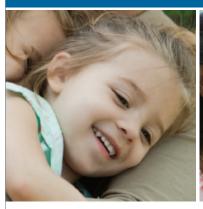
Preventive Care

STATE OF COLORADO 2011 - 2012 BENEFITS







Why preventive care is important

Preventing disease and detecting disease early, if it occurs, are important to living a healthy life. And the better your health, the lower your health care costs are likely to be. Following these guidelines, along with the advice of your doctor, can help you stay healthy. Talk to your doctor about your specific health questions and concerns, and follow his or her recommendations.

For more information on preventive care, visit our online website at **www.uhcpreventivecare.com** to identify your age and gender-specific preventive care guidelines, based on recommendations of the U.S. Preventive Services Task Force and other health organizations. Use the recommendations provided on our website, along with the charts inside this brochure to talk with your doctor about the preventive health screenings that are right for you.

Guidelines for maintaining your health

Screening: children ages 0-18 years		
Age	Screening Test	Frequency
Newborn	Newborn screening (PKU, sickle cell, hemoglobinopathies, hypothyroidism)	Once
	Hearing Screening	Once
Birth-2 months	Head circumference	At each preventive visit
Birth-18 months	Height (length) and weight	At each preventive visit
3-4 years	Eye screening	Once
6-8 years	Obesity	At each preventive visit
12-18 years	Depression	At each preventive visit

Counseling: children ages 0-18 years

As your child grows, talk to their doctor about:

- · Development
- · Dental and oral health
- · Child abuse

- · Nutrition and eating disorders
- Safety
- · Alcohol and drug abuse

- Physical activity
- Tobacco use



Recommended immunization schedule for persons aged 0 through 6 years - United States, 2010

For those who fall behind or start late, see the catch-up schedule

V accine	Birth	1 month	2 months	4 months	6 months	12 months	15 months	18 months	19-23 months	2-3 years	4-6 years	
Hepatitis B ¹	НерВ	Не	рВ			НерВ						
Rotavirus			RV	RV	RV2							
Diphtheria, Tetanus, Pertussis			DTaP	DTaP	DTaP	DTaP See footnote 3 DTaP			DTaP			
Haemophilus influenza type b			Hib	Hib	Hib	Н	ib					
Pneumococcal			PCV	PCV	PCV PCV					PPSV		
Inactivated Poliovirus			IPV	IPV	IPV					IPV		
Influenza					Influenza (yearly)							
Measles, Mumps, Rubella						M	ИR				MMR	
Varicella						Vari	cella				Varicella	
Hepatitis A					HepA (2 doses)				HepA Series			
Meningococcal									М	CV4		

Source: Centers for Disease Control and Prevention Recommended immunization schedules for persons aged 0 through 18 years - United States, 2010; 58(51&52)

Recommended immunization schedule for persons aged 7 through 18 years - United States, 2010

For those who fall behind or start late, see the catch-up schedule

Vaccine	7-10 years	11-12 years	13-18 years						
Tetanus, Diphtheria, Pertussis		Tdap	Tdap						
Human Papillomavirus (covered for females; not for males)		HPV (3 doses)	HPV Series						
Meningococcal	MCV	MCV	MCV						
Influenza		Influenza (yearly)							
Pneumococcal		PPSV							
Hepatitis A		HepA Series							
Hepatitis B		HepB Series							
Inactivated Poliovirus	IPV Series								
Measles, Mumps, Rubella	MMR Series								
Varicella	Varicella Series								

SOURCE: Centers for Disease Control and Prevention, Recommended immunization schedules for persons aged 0 through 18 years - United States, 2010; 58(51&52)

^{1.} Administration of 4 doses of HepB to infants is permissible when combination vaccines containing HepB are administered after the birth dose.

^{2.} If Rotarix® is administered at ages 2 and 4 months, a dose at 6 months is not indicated.

^{3.} The fourth dose may be administered as early as age 12 months, provided at least 6 months have elapsed since the third dose.

Preventive Care Guidelines: Adults over age18

Range of recommended ages

Years of Age	18	25	30	35	40	45	50	55	60	65	70		
Screenings													
Height and weight	At each preventive visit to assess normal development and general health.												
Obesity	At each	At each preventive visit to assess risks of obesity.											
Vision screening	Frequen	Frequency recommended by physician based on risk factors to assess vision.											
Dental screening	Periodic	Periodically to assess dental condition and detect medically related dental problems.											
Blood pressure	Regular screening for adults at standard risk.												
Cardiovascular disease						Regular Screening beginning at age 45 for men and 55 for women. UPSSTF recommends the use of aspirin for men age 45 to 79 years. For those at high risk for heart disease, discuss aspirin and low risk alternatives with your physician.							
Abdominal Aortic Aneurysm screening									aortic a 65-75 y those a disease and low	ng for abd neurysm ir vears old. I t high risk , discuss a risk alterr ur physicia	n men For for heart aspirin natives		
Cholesterol (Lipid) test					ery 5 years, beginning at age 35 for men and 45 for women. For those at h risk for heart disease, consult with your physician.								
Diabetes screening		Regular screening of adults for type 2 diabetes in asymptomatic adults with sustained blood pressure (either treated or untreated) greater than 135/80 mm Hg.											
Prostate screening	Men 40 and older consult with your physician regarding screening benefits/risks.												
Colorectal screening						Routine Colorectal screening beginning at 50 years, high risk person should be screened at younger ages. Interval determined by method. Speak with your physician.							
Mammography					every of physicial Discuss your ph	ening Mammography for all adult women of standard risk one to two years beginning at age 40 or as directed by your cian. Women at defined high risk should be screened earlier. iss with your physician. For those at high risk, consult with ohysician regarding breast cancer prevention alternatives ow risk of adverse effects.							
Osteoporosis screening										Routine screenir women 65 and Screeni for post menopa women defined risk. Dis with you physicia	ng for age older. ng - usal at high cuss		
Cervical cancer screening (Pap Smear)***		Every two years beginning at age 21 or for females who are sexually active, after 3 normal screenings, every 3 years or at a frequency recommended by physician based on risk factors.											
Sexually Transmitted Diseases (gonorrhea, HIV and syphilis)	Routine screening for those sexually active at increased risk. Routine screening for Chlamydia for females under 25. Syphilis screening recommended for ALL pregnant women.												
Screening for rubella, iron deficiency, urinary tract infection, Hepatitis B, blood type and RH(D) incompatibility screening	For pregnant Women at first pre-natal visit without prior screening, proof of immunization or immunity or at increased risk.												

Years of Age	18	25	30	35	40	45	50	55	60	65	70	
Screenings												
Folic Acid – recommended dosage is 0.4 - 0.8mg daily		Recommended for adult women of childbearing age beginning at age 18 who are considering pregnancy.										
Tobacco/nicotine use		Routine Screening and counseling. Detection of potential health risks associated with tobacco/Nicotine use. Opportunity for tobacco cessation counseling.										
Alcohol/illicit drug abuse	Routine	Routine screening and counseling. Detection of potential health risks associated with Alcohol/Illicit drug abuse.										
Counseling	18 25 30 35 40 45 50 55 60 65 70											
Promote and support breast feeding and post-partum counseling	Women	after child	lbirth.									
Nutrition, physical activity, sun exposure, depression and injury prevention	Periodic	screening	g and cou	nseling.								
Immunizations	18	25	30	35	40	45	50	55	60	65	70	
Human Papilloma virus vaccine		tered to fe 26 with ph										
Tetanus-Diphtheria (Td/Tdap) vaccine	,	Every 10 years for adults who have completed the primary series and if the last vaccine was received 10 or more years ago, substitute for a single booster of Td.										
Measles, Mumps, Rubella (MMR) vaccine	generall would n	Once for all with lack of immunity. Adults born before 1957 are generally considered to be immune to measles and mumps so would not require vaccination. Those born after 1957 may need a 2nd dose. Consult with your health care provider.										
Varicella (VZV) vaccine					lack of im d chicken		sceptibles	s: People	13 and old	ler who ha	ve not	
Hepatitis B vaccine	Three do	oses for a	ll persons	at risk an	d pregnan	t women a	at first pre	natal visit.	Discuss v	vith your p	hysician.	
Hepatitis A vaccine	For all p	ersons at	risk. Discı	uss with yo	our physic	ian.						
Influenza vaccine	,		, ,	•	,		, , , ,		ective with single vaco		-2011	
Meningococcal vaccine	One or r	more dose	s for Indiv	iduals at l	nigh risk.**	Discuss v	vith your p	hysician.				
Pneumococcal Polysaccharide vaccine (PPV)										One or t doses fo individua high risk complica of infect Discuss your phy	or uls at for ations ion.*** with	
Zoster	One dose between ages 60-75.										n ages	

Upper age limits should be individualized for each patient

- * See www.preventiveservices.ahrq.gov for U.S. Preventive Services Task Force recommendations on colorectal cancer screening and other clinical preventive services.
- ** High risk is defined as adults who have terminal complement deficiencies, had their spleen removed, their spleen does not function or they have medical, occupation, lifestyle or other indications such as college freshmen living in dormitory or other group living conditions.
- *** For persons aged 65 and older, one time revaccination is recommended if they were vaccinated more than 5 years previously and were younger than age 65 years at the time of primary vaccination.
- *** ACOG, "Cervical Cytology Screening" Obstetrics & Gynecology; Practice Bulletin #109; 12/09

These guidelines are generally based on the recommendations of the U.S. Preventive Services Task Force (USPSTF) and of the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention. They are provided for informational purposes only, and do not constitute medical advice. Individuals with symptoms or at high risk for disease may need additional services or more frequent interventions. Always consult your doctor before making any decisions about medical care. These guidelines do not necessarily reflect the vaccines, screenings or tests that will be covered by your benefit plan. Always refer to your plan documents for specific benefit coverage and limitations or call the toll-free member phone number on the back of your ID card. Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by UnitedHealthcare Insurance Company, United HealthCare Services, Inc. or their affiliates. Health Plan coverage provided by or through a UnitedHealthcare company.

